

Peterson (Jr.)



OUTLINE OF A PLAN FOR AN EPILEPTIC COLONY.*

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It is a great pleasure to come before this board at the invitation of Mr. Letchworth and of your President, Mr. Craig, to speak to you upon a subject in which I have been deeply and earnestly interested and engrossed for five or six years, knowing that the law in this State has been passed, and that you are a commission appointed under that law, not only to select a site and prepare plans for an epileptic institution, but to prepare those plans on the colony system, with a view not only to the caretaking of this class, but to their education and their instruction in different trades and callings.

In this work we must lose site of the word "institution" if possible. We must rather think of some small village. The less it is like an institution the better. There should be no very large buildings, nor should there be a symmetrical arrangement of the pavilions, cottages, workshops, etc., such as has been made at Gallipolis, Ohio. Although the ideas as to the character of an epileptic retreat, such as I have always maintained and frequently described in various papers, were carefully instilled by me into the Ohio commissioners who visited me in New York with their architect, and although my instructions were, in the main, followed in the distribution of buildings and the determination of their character and purposes, yet it was not apparently possible for the architect to rid himself of the hospital, asylum, or institutional idea, and doubtless, too, the people in the vicinity were eager in demanding something imposing in the way of State architecture.

1. The first point, then, to be borne in mind is that *buildings should be arranged in a village or colony plan*, separated entirely, often provided with their own little gardens, surrounded by hedges, so that they shall be as independent and home-like as possible. *Though there should be system in their arrangements,*

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Presented by the author

there should be no symmetry, such as would lead to their designation as an asylum or an institution at first sight.

2. The second point is to keep in mind the aims of the colony.

(a) *It is to be a home*—a community of people cut off all their lives from ordinary social pleasures and pursuits by a malady that really robs them, in most cases but for a few moments each day, or week, or month, or several months, of their faculties.

(b) *It is to be a school.* Denied education in public schools, the epileptic here receives such advantages as he requires, and each and every member of the colony, without regard to age, should be given the opportunity, if desired, of acquiring knowledge.

(c) *It is to be an industrial college.* All useful trades and callings are to be conducted in this colony. Hence, provision for shops of various kinds must be made.

(d) *It is to be a hospital.* That is, every patient will be treated for his disorder, and there will be one building set aside for such as are feeble-minded, or insane, or confined to bed.

3. The third subject for consideration is the probable percentage of the various classes. Roughly speaking, we should provide an observation building for new cases (five per cent.), hospital accommodation for say ten per cent., school buildings for fifteen per cent., and shops, residences, etc., for some seventy per cent. of workers.

4. As to land, there should be from 300 to 400 acres or more, if possible, diversified but well adapted for agriculture, stock-raising, and the like. Out-of-door employment is one of the best means of treatment of epilepsy.

5. The colony should be situated in the centre of population, because of ease of access for patients and advantages for the visitation of friends. But a far more important reason for placing it near the largest city of the State is to secure the services of a visiting board of those gentlemen who make a specialty of nervous and mental diseases, and of an expert pathologist, who, together would make it one of the great objects of the colony to discover the cause and cure of a disease from which some 120,000 people are suffering in the United States alone at the present time.

6. Suggestions as to buildings and their arrangement :

(a) The superintendent should have a private house to himself.

(b) The observation wards (five per cent. of cases), the infirmary wards (for the sick, infirm, demented and insane, amounting to ten per cent.), and the administration building could be combined advantageously. The observation wards are for new-comers, who must be examined and studied for weeks at a time in order to ascertain their character, their abilities, the nature of their seizures, and the proper kind of treatment for them to undergo. Between these should be the administration building, offices, rooms for one or two resident physicians, accommodation for members of a nurses' training school, etc. Back of these again, but connected by a corridor, are the hospital

wards, to be arranged not only for those who are sick from ordinary illnesses, but also for those who are too feeble minded for work or who are insane. Great pains should be taken to isolate the wards for excited patients to such an extent that no one will be disturbed by them. These buildings should contain small dormitories and private rooms. In some part of the hospital should be a hydrotherapeutic chamber, with walls and floor impermeable to water, provided with rain-baths, hot boxes, cold plunge, douches and bath-tubs. There should be separate kitchens and dining-rooms.

(c) Remote from here a group of cottages for *women*, with extensive gardens for the raising of flowers, flower seeds, berries, bees, etc.

(d) A group of cottages for *men* next to the gardener's house. These are the men who work about the grounds, caring for the trees, lawns, hedges, paths and roads. The grounds will be made not only attractive, but instructive, for all trees and shrubs are to be labeled, and an effort should be made to establish not only a botanical garden but a zoological as well.

(e) A school building should be provided for children of both sexes of tender years. It should be their residence as well, and the school conducted on the kindergarten plan.

(f) A large school building for each sex, containing not only school and recitation rooms, but rooms for studying music, drawing, designing, architecture, modeling, and the like, also rooms for teachers and some of the pupils.

(g) A museum, lecture-room, library, reading-room, and gymnasium, with a swimming-bath, might be advantageously combined in one building.

(h) A chapel.

(i) Stables for cows, sheep, pigs, horses, and dairy, with cottages for men detailed to see to the work required in this department.

(j) A farmer's house, with a group of cottages for men engaged in farm work.

(k) Shops *For men*: 1. Tailors, shoemakers and saddlers in one building. 2. Carpenters, painters and glaziers, furniture-makers and upholsterers in one building 3. Blacksmiths, iron-founders, tinners and locksmiths in one building. 4. Printers, bookbinders, etc., in one building. *For women*: Sewing-room, dressmaking, millinery, fancy work, etc., in one or two buildings. Bed-rooms may be combined with some of these buildings, the object being to scatter the residents as much as possible.

(l) A central kitchen, bakery and store-room, combined with a cottage or two for the women who work here. From this central kitchen may be sent out to the various houses the chief articles of diet, which should always be simple—bread, mushes, milk, eggs and various groceries, soups and meat once daily. Every cottage, however, should have its own dining-room and small kitchen for reheating some foods and for light cooking.

(m) Laundry, wash-room, ironing-room, mending-room,

with a residence for those women who are occupied in this department.

(n) A pathological laboratory of the most recent design fully equipped with everything requisite for good scientific work. This laboratory to be in connection with the mortuary and remote from other buildings. A cottage not far away, for the residence of the pathologist, would be necessary.

While I have endeavored to delineate as well as possible the needs of a model epileptic colony, there are many things not mentioned here that will develop with the gradual evolution of the colony. For instance, if the land is such that quarries exist upon it, or that brick may be manufactured, a new industry would arise, requiring its particular cluster of buildings for work and residence.

The buildings that I have enumerated reach the figure of about thirty. The Bielefeld colony, with a thousand patients, had fifty-five buildings at the time of my visit several years ago.*

With the exception of the observation and hospital building, none of the buildings need be specially planned to meet the wants of epileptics. They should be as much as possible like ordinary houses.

The ventilation should be by fireplaces and windows, as in ordinary town and country houses.

Each residence should have, if possible, a simple rain-bath, up-stair dormitories and bed-rooms, with a sitting-room, small kitchen and dining-room below.

It will doubtless be of advantage to make all buildings fire-proof.

All the buildings need not be constructed at once. A community of this kind cannot be provided for in a moment. It must grow into a colony by a sort of evolution, its wants being supplied as they become manifest, through the intelligent direction of its superintendent and trustees. The inhabitants of this colony will in time be able to erect their own buildings as required.

And now a word or two as regards commitment. All patients under age can be sent by their parents, just as they would send children to boarding schools, transferring their parental authority for the time being to the officers and teachers of the colony. All other patients are to be voluntary denizens of the colony, except such as through mental impairment of any kind require confinement in the infirmary; and with these last the ordinary procedures taken in lunacy cases should be carried out, formally committing them to the infirmary of the colony.

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* The Bielefeld Epileptic Colony. *Med. Record*, April 23, 1877.—The Colonization of Epileptics. *Journ. of Nervous and Mental Disease*, December, 1889.—A Plea for the Epileptic. *N. Y. State Charities Record*, August, 1890.—Progress in the Care and Colonization of Epileptics. *Journ. of Nervous and Mental Disease*, August, 1892.